## APPLICATION FOR EMPLOYMENT TOWN OF BETHEL, CONNECTICUT

We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, the presence of a non-job-related medical condition or handicap, or any other legally protected status.

## (PLEASE PRINT)

Position(s) Applied For:	Date of Application:				
How Did You Learn About Us?					
Advertisement Friend Walk-In 1	Employment Agency	Relati	ve Other		
Last Name First Name		Middle Name			
# Street		City	State	Zip Code	
Telephone Number(s)			ity Number		
If under 18 years, can you provide proof of your eligibility	y to work?		YES	NO	
Have you ever filed an application with us before:  If YES, give date			YES	NO	
Have you ever been employed with us before:  If YES, give date			YES	NO	
May we contact your present employer?:			YES	NO	
Are you prevented from lawfully becoming employed in t Proof of citizenship or immigration status will be required upon	•	Visa or Imr	migration Status? YES	NO	
On what date would you be available for work?					
Are you available to work: Full Time	Part Time	Sl	nift Work	Temporary	
Are you currently on "lay-off" status and subject to recall	?		_ YES	NO	
Can you travel if a job required it?			YES	NO	

## **CRIMINAL CONVICTIONS**

"Conviction" for the purpose of this application, means a final judgment or verdict of guilt, a plea of guilt or a plea of nolo contendere, in any state or federal court, regardless of whether an appeal is pending or could be taken. This does not include a final judgment or verdict that has been expunged by pardon, reversed, set aside or otherwise rendered invalid. "Crime" for the purposes of this application means an offense greater than a Class C misdemeanor.

Have you ever been convicted of a crime?			YES			NO
If so, please explain (include a des	scription of each crime, th	e location and the ap	proximate date	of the co	nviction)	
Are any criminal charges pending	against you?			YES		NO
If so, please explain (include a des	scription of the charges an	d the jurisdiction in	which the charg	ges are pe	nding)	
Are you currently participating in education)?	in a program of deferre	d adjudication, (e.g	accelerated r	ehabilitat YES	ion, pre-trial drug	or alcoh
If so, please explain (include a des	scription of the program, t	he charges filed agai	nst you and the	jurisdicti	on in which they a	e pending
Educational History						
	Elementary School	High School	Undergra College/S		Graduate / Profe	essional
School Name & Location						
Years Completed						
Diploma/Degree						
Describe Course of Study						
Describe any specialized training, apprenticeship, skills and extra-curricular activities						
Describe any honors you have received						
State any additional information you feel may be helpful to us in considering your application						
Indicate any foreign languages you can speak, read and/or write	Fluent	Good			Fair	
Speak						
Read Write		+				
WITTE						
List professional, trade, business of origin, age, ancestry, or handicap of other		ces held. You may exclu	ude memberships,	which would	d reveal sex, race, relig	ion, nationa

If Yes, please des	scribe:				
	the essential functions of the ESNO	he job for which you are app	lying, with or without reasonable accommodation?		
		YES	_ NO Operator's #		
Commercial <b>D</b> riv If a CDL is required	vers License?  for this position, you will be requ	YESired to provide us with a copy of y	_ NO Operator's #		
Employme	nt Experience				
			rvice assignments and volunteer activities. You may exclude n, handicap or other protected status.		
Employer		TO FROM	Work Performed		
Address					
Telephone #					
Job Title	Supervisor	Hourly Rate			
Reason for Leaving	<u> </u>				
Employer		Dated Employed TO FROM	Work Performed		
Address					
Telephone #					
Job Title	Supervisor	Hourly Rate			
Reason for Leaving					
Employer		Dated Employed	Work Performed		
1 7		TO FROM			
Address		,			
Telephone #					
Job Title	Supervisor	Hourly Rate			
Reason for Leaving					

Special Skills and Qualifications	
Summarize special job-related skills and qualifications acquired from employment or other e	experience.
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References	
Give name, address and telephone number of three references that are not related to you and	are not previous employers.
1	
2	
3	
Applicant's Statement	
PLEASE READ: I certify the above information is correct and truthful. I realize, too, tapplication may be grounds for rejection of this application or termination of employment employment commenced. I also give consent for you to check with personal references, previous employers and educational institutions concerning my past employment and personal relevant to my background from other employers and to check criminal and driving employers and educational institutions from any liability arising from disclosure of information history. I further understand that the acceptance of this form does not constitute an employapplication completely may result in my disqualification from any further consideration to employment eligibility in accordance with the Immigration Reform and Control Act of 1986	ent, if the falsification is discovered after cost-conditional job offer medical records and history and to receive reports that may grecords. I release the Town, previous on concerning my employment or personal oyment agreement. Failure to fill out this for employment. Proof of citizenship for
<b>DRUG/ALCOHOL TESTING</b> : The Town of Bethel reserves the right to conduct pre-enapplicants. Applicants may be required to pass a test for drugs of abuse and/or alcohol mist the withdrawal of any offer of employment.	
A PREEMPLOYMENT PHYSICAL MAY BE REQUIRED DEPENDING UPON THE	E POSITION SOUGHT.
I hereby understand and acknowledge that, unless otherwise defined by applicable law, a Collective Bargaining Agreement, any employment relationship with this organization is of Employee may resign at any time and the Employer may discharge Employee at any tunderstood that this "at will" employment relationship may not be changed by any written d is specifically acknowledged in writing by an authorized executive of this organization.	an "at will" nature, which means that the ime with or without cause. It is further
In the event of employment, I understand that false or misleading information given in my discharge. I understand, also, that I am required to abide by all rules and regulations of the expectation of the experiment of the experi	
Signature of Applicant	 Date

**Town of Bethel, Connecticut** Clifford J. Hurgin Municipal Center 1 School Street Bethel, CT 06801 203-794-8501 Fax: 203-778-7520